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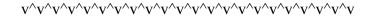
## For Fun:

7. Bicycle Safety Quiz, CDC, SafeUSA

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1. From the Anchorage Daily News, Tuesday, July 23, 2001

A Fairbanks man bicycle riding on the Parks Highway crashed at Mile 317 and suffered from possible broken ribs, a broken hip and numerous cuts and bruises all over, including his head. Alaska State Troopers say his injuries could have been fatal had he not been wearing his helmet. As it is, the man has no head injuries although his helmet was seriously damaged.



### **2.** Fire station in a box'

New tools could quell blazes in rural Alaska villages

By Anne Marie Tavella, Anchorage Daily News (Published: July 23, 2001) Excerpts:

Last year in Golovin, on the Seward Peninsula, a smokehouse blaze traveled to a neighboring house and burned it to the ground. The village's water truck had just finished filling the public Laundromat and didn't have a drop left to fight the fire. By the time the truck was refilled, firefighters could only prevent the flames from spreading to another building.

This scene is not unfamiliar in rural Alaska. According to the State Fire Marshal's Office, Alaska has the highest rate per capita of fire fatalities in the nation, three times the national average.

Now a new program from Alaska Village Initiatives, in conjunction with the State Fire Marshal's Office and the Bureau of Land Management, is attempting to better equip villages to fight fire with foam.

There are roughly 100 villages in Alaska that have little or no firefighting equipment, AVI president Tom Harris said. Golovin, where many homes obtain water from the delivery truck and about half of the houses have no plumbing, is not unique. "In some villages fire protection is limited to the snowballs they can throw at the fire," Harris said.

The federally funded pilot project is sending miniature fire stations to six communities: Selawik, Golovin, Quinhagak, St. Michael, Kwethluk and Old Harbor. Each village will receive two fully equipped trailers that come with both wheels and skis so that they can be towed by four-wheelers or snowmachines. The entire package costs about \$72,000 per village. The trailers were designed to solve the major problem of getting to fires. Firetrucks have proved useless in some villages because there are no roads, Harris said.

The first trailer is designed for active firefighting and houses the main tool: the Tri-Max 30. The device uses air to convert 29 gallons of water and 1 gallon of a fire-suppressant chemical into 600 gallons of cold-compressed air foam. The foam can be used at temperatures as low as 20 degrees below zero and can be modified for temperatures down to minus 40, Harris said.

The cost of refilling the device is about \$25. For training purposes the chemical can be replaced with dish soap, lowering the cost to about \$4.

The unit also contains two smaller 3-gallon jugs of the water mixture, which yield 60 gallons of foam. Packed next to these jugs are two bottles of a chemical to fight electrical fires and other supplies including helmets, gloves and axes.

The second trailer is for equipment, storing an ice auger and a tube for obtaining water, 400 feet of hose, more helmets and tools. "It's a virtual mini-fire department for the community," Harris said.

Each trailer is marked with the name of the village and name or names of people chosen by the communities.

Mark Barker, supervisor of fire service training with the State Fire Marshal's Office, also hopes that the project will eventually be able to send units to all villages that have inadequate fire protection. "If its successful, we want to get these units all over the state," he said.

Key to the project is the fact that the units and their container are designed for firefighting in rural Alaska, Barker said. The units are sent to the villages in a bright-red insulated container about 8 1/2 by 10 feet. "We've been calling it a fire station in a box," he said.

The second key is the training that will accompany the equipment. In addition to the six units going out to the villages, a seventh unit will remain in Anchorage to train firefighters on their way out to the Bush. Barker estimates training will begin by the end of the month, with two trainers visiting each village. "Many times equipment is sent out to villages but no training is attached," he said.

**3**. August Calendar for Alaska SAFE KIDS Coalition meetings and child passenger safety events. Submitted by Gordon Glaser, CHEMS



**4**. Is Suicide Contagious? A Study of the Relation between Exposure to the Suicidal Behavior of Others and Nearly Lethal Suicide Attempts

Mercy JA, Kresnow1 M, O'Carroll PW, Lee RK, Powell KE, Potter LB, Swann AC, Frankowski RF, Bayer TL. Am J Epidemiol 2001; 154(2): 120-127.

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This study sought to determine the association between nearly lethal suicide attempts and exposure to the suicidal behavior of parents, relatives, friends, or acquaintances and to accounts of suicide in the media. The authors conducted a population-based case-control study in Houston, Texas, from November 1992 through July 1995. They interviewed 153 victims of attempted suicide aged 13-34 years who had been treated at emergence departments in Houston and a random sample of 513 control subjects. After controlling for potentially confounding variables, the authors found that exposure to the suicidal behavior of a parent (adjusted OR = 1.5; 95% CI: 0.6, 3.6; p = 0.42) or a nonparent relative (adjusted OR = 1.2; 95% CI: 0.7, 2.0; p = 0.55) was not significantly associated with nearly lethal suicide attempts. Both exposure to the suicidal behavior of a friend or acquaintance (adjusted OR = 0.6; 95% CI: 0.4, 1.0; p = (0.05) and exposure to accounts of suicidal behavior in the media (adjusted OR = 0.2; 95% CI: 0.1, 0.3; p = 0.00) were associated with a lower risk of nearly lethal suicide attempts. Exposure to accounts of suicidal behavior in the media and, to a lesser extent, exposure to the suicidal behavior of friends or acquaintances may be protective for nearly lethal suicide attempts, but further research is needed to better understand the mechanisms underlying these findings.

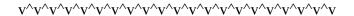
5. Scooter Injuries: A New Pediatric Morbidity

Abbott MB, Hoffinger SA, Nguyan DM, Weintraub DL. Pediatrics 2001; 108(1): e 2.

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Full text available online www.safetylit.org/week/new010709.htm

The authors described types of injuries, mechanisms of injury, and treatment of injuries caused by scooter use in children, and to discuss issues of injury prevention in children who use scooters. Data were collected from 14 children seen by a general pediatrician and an orthopedic surgeon over a 3-month period in the summer of 2000. Detailed histories were obtained from patients and their families, and medical records were reviewed. Eleven of the 14 patients suffered fractures. The injuries in the other 3 patients were a large abrasion, a laceration, and a septic knee. Half (7) of the children were injured within the first day of riding their scooter, and 13 of the 14 injuries occurred within the first month of scooter use. Only 5 patients used protective gear at the time of their injuries, and those patients were injured in unprotected parts of their bodies.



**6**. Smoking and the need for prevention of fire-related injuries. Submitted by the Alaska Tobacco Program, CHEMS

# **Cigarette-Caused Fires Pose Threat to Older Persons**

In the past days, cigarette-caused fires in North Carolina and Ottawa, Canada caused one death and 41 persons to have to evacuate an assisted living facility. The news article from Ottawa said "the fire was caused by careless use of smoking materials." Others among us would say it was not just careless use of smoking materials, it was virtually criminal negligence on the part of the tobacco industry since they know that thousands of fires are caused annually by cigarettes, and the industry knows how to make fire resistant cigarettes which will go out quickly when not being smoked. For more on cigarettes, fires and the numbers of deaths to older persons caused by these fires, go to http://www.tcsg.org/tobacco/tobacco.htm and click on the Spring/Summer, 1997 issue of Tobacco & the Elderly Notes.

As we at The Center for Social Gerontology draft model smoking policies for facilities serving older persons, cigarette-caused fires are a significant issue, as illustrated by these cases. For more on these incidents, see below, including links to the news articles.

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# Fire Forces 41 To Evacuate North Carolina Assisted Living Facility; Smoking in Bed Likely Cause

A fire, possibly caused by a cigarette, damaged a home for the disabled Monday, sending 41 residents to an emergency shelter. No one was injured. Fire inspectors had not officially determined the cause Monday evening, but Burke County Deputy Fire Marshal Mike Long said the fire began in a patient's room at Long View Assisted Living, in a rural area about four miles northeast of Morganton. Administrator Dianne Patton said a patient was smoking in bed.

http://www.charlotte.com/partners/news/briefs/news briefs 3 Jul10.htm

## 86 Year Old Ottawa Woman Dies After Setting Herself on Fire While Smoking

An 86 year old Ottawa woman died after inadvertently setting herself on fire while smoking. She was living in an apartment when the cigarette resulted in her clothing catching on fire.

<a href="mailto:shiftp://www.canoe.ca/OttawaNews/OS.OS-07-10-0014.html">- http://www.canoe.ca/OttawaNews/OS.OS-07-10-0014.html</a>



## 7. For Fun: Test Your Bike Safety IQ

Last year, more than 750 cyclists were killed in biking crashes, according to the National Safety Council--and bike riders made more than 580,000 emergency-room visits. Therefore, the best defense for a safe ride is to develop safe riding habits.

Today, more than two-thirds of bicycling-related deaths involve adults, compared with less than a third two decades ago, according to the Centers for Disease Control and Prevention. In short, bicycle safety is an important issue for all ages. This quiz should test your bike-safety knowledge.

- 1. When a cyclist holds his or her left arm out, with the hand raised at a right angle and palm forward, it means
- a. Turning left
- b. Turning right
- c. Slowing down
- d. Give me five

Answer: b. If the forearm is held down at a right angle, it means slowing down. Holding the left arm straight out signals a left turn. Use these hand signals to let other riders and drivers know what you're doing.

- 2. A cyclist's most important piece of equipment is the
- a. Tire pump

- b. Helmet
- c. Water bottle
- d. Headphones

Answer: b. The rule is: Always wear a helmet. Last year, 96 percent of the bicyclists killed weren't wearing a helmet. Leave the headphones at home, by the way. They make it hard to hear traffic.

- 3. Riding at night is best done
- a. With a light
- b. With a friend
- c. Quietly, because people are sleeping
- d. Not at all

Answer: d. Riding at night is more than seven times riskier than riding during the day, according to a Consumer Product Safety Commission study. If you must ride at dusk or at night, be sure your bike has a light and wear retroreflective clothing.

- 4. When you approach a red light at an intersection, you should
- a. Slow down
- b. Stop
- c. Shift to a lower gear
- d. Turn the corner

Answer: b. Stopping is not only the safe thing to do, it's also the legal thing to do at red lights and stop signs. Bicyclists must follow the same traffic laws that apply to automobile drivers.

- 5. When cycling in a roadway, you should ride
- a. On the right hand side of the road with traffic
- b. On the left, facing traffic
- c. At the same speed as traffic
- d. Standing up

Answer: a. By going with traffic and staying to the right, you'll be more visible to automobile drivers.

- 6. A bicycle helmet should be replaced
- a. After it gets wet
- b. When it goes out of style
- c. After three months or 2,000 miles
- d. After a crash

Answer: d. Even if there's no visible damage, the lining or shell may be weakened, and it can offer less protection against the next blow.

- 7. Children can ride in a bicycle safety seat when they are
- a. 1 year old
- b. 2 years old

- c. Old enough to walk
- d. Able to buckle the straps

Answer: a. At 1, children are generally strong enough to sit up and hold their head upright with a helmet on. Remember, however, that having a child on your bike makes it harder to steer, stop and maneuver quickly.

# Helmets: Put a Lid on It Here are some basic helmet rules to remember:

Your helmet should have a sticker from the American National Standards Institute (ANSI), the Snell Memorial Foundation (SNELL), or the American Society for Testing and Materials (ASTM) showing that it meets their safety standards.

Your helmet should be comfortable, sit level on your head, and be snug enough so that it doesn't rock back and forth more than an inch.

Always buckle your helmet straps.

Don't buy a helmet for your child to "grow into." Buy one that fits properly.